

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.G.		5/25
O.I.P.E. CLASSIFIER			5/25
FORMALITY REVIEW	H.L.	1079	07/20/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 " Restricted O Objected

Claim	Date
1	Final Original
2	✓ 10/20/02
3	✓ 5/20/03
4	✓ 5/20/03
5	✓ 5/20/03
6	✓ 5/20/03
7	✓ 5/20/03
8	✓ 5/20/03
9	✓ 5/20/03
10	✓ 5/20/03
11	✓ 5/20/03
12	✓ 5/20/03
13	✓ 5/20/03
14	✓ 5/20/03
15	✓ 5/20/03
16	✓ 5/20/03
17	✓ 5/20/03
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50	✓ 5/20/03

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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